

**WASHINGTON LTC TASK FORCE PROJECT
PUYALLUP TOWN HALL MEETING
May 2006**

SUMMARY OF PRESENTATIONS

TASKFORCE REPRESENTATION:

Members Present:

Senator Karen Keiser
Senator Linda Evans Parlette
Representative Dawn Morrell
Steve Hill, Administrator, Health Care Authority
Mark Rupp, Governor's Representative

Members Excused:

Representative Barbara Bailey
Representative Mary Skinner
Mary Selecky, Secretary, Department of Health
Robin Arnold-Williams, Secretary, Department of Social and Health Services

PUBLIC COMMENTORS:

A total of 20 individuals addressed comments to the Taskforce. These individuals represented a cross-section of consumers, parents, home care providers, nursing facility providers, boarding home/assisted living providers, adult day health providers, licensed professionals, SEIU 775, the Korean Womens Association, a public health research agency, a financial planning agency, a community aging agency, Alzheimer/Dementia advocates, DD advocates, and the general public.

INTRODUCTORY STATEMENT:

The following statement and questions were distributed to participants at the beginning of the hearing:

“The 65 and older population in Washington State is projected to double over the course of the next 20 years, going from 11-percent of our state’s population to almost 20-percent. Additionally, there are an increasing number of people – young and old, alike, - who, in addition to their developmental disability, have special needs with respect to issues around community protection, language and cultural differences, and familial supports. From the perspective of your organization and those you represent, what will your organization (or *should* the organization of the industry as a whole) look like in 20 years and how are you planning (*or* how should the industry be planning) for this increasing need for services among the aged and disabled? What is the number one policy issue the LTC task force should consider in light of these changing demographics?”

SUMMARY OF PUBLIC COMMENTS/RECOMMENDATIONS:

1. Financing

- Acuity levels are changing in nursing facilities and boarding homes; despite recent rate increases for nursing facilities, changes still need to be made to Medicaid, especially for boarding homes, in response to the acuity levels.
- Medicaid is not going to be the long term fix; other sources are needed to keep facilities financially viable.
- There is a gap between the cost of nursing facility care and what Medicaid pays; the payment system should be simplified and updated; reimbursement needs to reflect the increasing costs associated with recently updated federal regulations for nursing facilities.
- Facilities are faced with low reimbursement rates from the State while experiencing rising staffing, training, and liability insurance costs and delayed entry to nursing facilities.
- There needs to be financial equity across the long term care system for services provided.
- Regulations have increased over time but funding hasn't adjusted to associated increased costs of compliance.
- Funding is especially inadequate to care for persons with dementia; available slots for the specialized dementia program in boarding homes should be expanded.
- Funding for long term care needs to be stable; there needs to be an affordable system to address long term care needs of everyone in the State.
- Facilities are being forced to reduce the number of available Medicaid beds due to low reimbursement. Persons are not being allowed to remain in assisted living setting once they change to Medicaid funding.
- Costs are increasing due to higher staff training and increased RN oversight of operations.
- There is a prohibitive nature to adult day service and adult day health service in the State; reimbursement is low and the amount of authorized service is restricted. Need to provide out-of-home services like day care in order to successfully accomplish keeping people in home settings.
- Parents functioning as paid caregivers do not receive an equitable level of reimbursement with non-parent caregivers and do not receive equitable authorized levels of service.
- Promote a partner-up approach by educating people about what they can do to plan for long term care needs and how they can take personal accountability by purchasing long term care insurance; State needs to participate in federal long term care partnership program.
- Long term care insurance is currently unaffordable, lacks flexibility, and does not always follow through when need arises.
- Incentives need to be created to support purchase of long term care insurance.

2. Access to Services

- Medicaid-funded residents of nursing facilities should not have restrictions on services and supplies such as eyeglasses, medical supplies, etc.

- There are a large number of people who have been determined waiver-eligible but are designated as non-waiver individuals because the State has not provided sufficient capacity in the waiver to meet the need (DD and autistic populations).
3. Regulations
- Boarding homes are being institutionalized through regulation.
4. Workforce
- Home care attendants are not required to receive specific training in the care of special needs populations; the State requirements for attendant training are inadequate and turnover is a problem.
 - Nursing facilities have difficulty maintaining appropriate staffing; difficult to compete with hospitals and home health agencies for professional and aide level staff.
 - Staff need access to better training programs. Attendants should be cross-trained to increase portability across settings.
 - Need to raise wages of attendant care workers so they can take care of their own future.
5. Current System
- Assure that consumers are served in the appropriate setting in terms of safety, quality, and cost-effectiveness as strive to develop array of settings and services.
 - Nursing facilities are in need of new technology.
 - The state complaint investigation system has problems. It is very costly to appeal findings but in high number of cases the appeal is successful.
 - The growth rate of boarding homes and assisted living facilities is much less than in past due to less available capital and low reimbursement rates.
 - There needs to be better oversight of the home care system or better yet, the long term care system as a whole. Keep bad providers out of the system. Enforce quality requirements and labor regulations.
 - There has been slow expansion of the referral registry across the state.
 - Community elder care support programs are working and outreach programs need to be further supported.
 - Cultural and language competent services need to be available in all settings; shortage of in-home workers who can provide cultural/language appropriate services.
6. Special Populations
- Aging parents of adults with developmental disabilities are concerned about who will provide care when they are no longer able.
 - Washington citizens with disabilities of all kinds need access to affordable, accessible housing stock.
 - In order to provide the best care for all Washington citizens, services for the DD population should include:
 - i. Support for parents of newborn children from the point of diagnosis;
 - ii. Appropriate sexuality training and environment for adults;

- iii. Training in high school on how to manage own life;
- Tax credit for the DD individuals who are the basis around which the entire DD service delivery system exists.

7. Prevention and Intervention

- Fall injuries are a major cause of admissions to nursing facilities. Best practices have been developed for education and exercise interventions in conjunction with the Dept. of Health and now need to be published and distributed to the public.

8. Other

- The problem is what the public expects from the long term care system. There needs to be a major effort to change public perspectives on what they need and what should be provided to them by the State.
- The Governor should hold a summit involving advocates for all elderly and disability groups to foster knowledge of each others' needs, differences and commonalities across groups, and best practices of care and support.